

Financial Status Report

Short Form

Standard Form SF-269A

1. Federal Agency and Organizational Element to Which Report is submitted: <input type="text"/>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency <input type="text"/>	
3. Recipient Organization (Name and complete address, including ZIP code) <input type="text"/> <input type="text"/> <input type="text"/>			
4. Employer Identification Number <input type="text"/>	5. Recipient Account Number or Identifying Number <input type="text"/>	6. Final Report <input type="checkbox"/> Yes <input type="checkbox"/> No	7. Basis <input type="checkbox"/> Cash <input type="checkbox"/> Accrual
8. Funding/Grant Period From: (Month, Day, Year) <input type="text"/>	To: (Month, Day, Year) <input type="text"/>	9. Period Covered by Report From: (Month, Day, Year) <input type="text"/>	To: (Month, Day, Year) <input type="text"/>
10. Transactions	I Previously Reported	II This Period	III Cumulative
a. Total outlays	<input type="text"/>	<input type="text"/>	<input type="text"/>
b. Recipient share of outlays	<input type="text"/>	<input type="text"/>	<input type="text"/>
c. Federal share of outlays	<input type="text"/>	<input type="text"/>	<input type="text"/>
d. Total unliquidated obligations			<input type="text"/>
e. Recipient share of unliquidated obligations			<input type="text"/>
f. Federal share of unliquidated obligations			<input type="text"/>
g. Total federal share (sum of lines c and f)			<input type="text"/>
h. Total federal funds authorized for this funding period			<input type="text"/>
i. Unobligated balance			<input type="text"/>

This information will be submitted to the Grants Management Division

Send Data